

<b>SCC eFile</b>	<b>2012 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION</b>	<b>212524116</b>								
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME: <b>Ross-Simons of Warwick, Inc.</b></p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>CT CORPORATION SYSTEM 4701 COX RD STE 301 GLEN ALLEN, VA 23060-6802</b></p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>HENRICO COUNTY</b></p> <p>4.) STATE OR COUNTRY OF INCORPORATION: <b>RI</b></p> </div> <div style="width: 35%;"> <p>DUE DATE: <b>6/30/2012</b></p> <p>SCC ID NO: <b>F1618372</b></p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">CLASS</th> <th style="text-align: left;">AUTHORIZED</th> </tr> </thead> <tbody> <tr> <td>COMA</td> <td>11,995,000</td> </tr> <tr> <td>PREF A</td> <td>5,000</td> </tr> <tr> <td>PREF B</td> <td>1,200,000</td> </tr> </tbody> </table> </div> </div>			CLASS	AUTHORIZED	COMA	11,995,000	PREF A	5,000	PREF B	1,200,000
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<p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="text-align: center;">ADDRESS: 9 ROSS-SIMONS DRIVE</p> <p style="text-align: center;">CITY/ST/ZIP: CRANSTON, RI 02920</p>										
<p>7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p>										
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: DARRELL S ROSS  TITLE: PRESIDENT  ADDRESS: 9 ROSS-SIMONS DRIVE  CITY/ST/ZIP/CO: CRANSTON, RI 02920 </td> <td style="width: 5%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> </td> <td style="width: 40%; text-align: center; vertical-align: top;"> OFFICER <input checked="" type="checkbox"/> DIRECTOR </td> </tr> </table>			NAME: DARRELL S ROSS TITLE: PRESIDENT ADDRESS: 9 ROSS-SIMONS DRIVE CITY/ST/ZIP/CO: CRANSTON, RI 02920	<input checked="" type="checkbox"/>	OFFICER <input checked="" type="checkbox"/> DIRECTOR					
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NAME: DARRELL ROSS TITLE: CEO ADDRESS: 9 ROSS-SIMONS DRIVE CITY/ST/ZIP/CO: CRANSTON, RI 02920	<input checked="" type="checkbox"/>	OFFICER <input type="checkbox"/> DIRECTOR								

NAME:	MARK DORAN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	9 ROSS-SIMONS DRIVE		
CITY/ST/ZIP/CO:	CRANSTON, RI 02920		
NAME:	WILLIAM JOHNSON	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	9 ROSS-SIMONS DRIVE		
CITY/ST/ZIP/CO:	CRANSTON, RI 02920		
NAME:	ROBERT PULCIANI	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	9 ROSS-SIMONS DR		
CITY/ST/ZIP/CO:	CRANSTON, RI 02920		
NAME:	JOHN ROTH	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	9 ROSS-SIMONS DR		
CITY/ST/ZIP/CO:	CRANSTON, RI 02920		
NAME:	PETER STARRETT	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	9 ROSS-SIMONS DRIVE		
CITY/ST/ZIP/CO:	CRANSTON, RI 02920		
NAME:	DAVID WIEDERECHT	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	9 ROSS-SIMONS DRIVE		
CITY/ST/ZIP/CO:	CRANSTON, RI 02920		
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ STEPHEN J CARLOTTI	STEPHEN J CARLOTTI, ASST SEC	6/27/2012	
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			